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Contract No.   Cont	To						COPY /	OF
No. and Date of Date of Delivery Order of Service   Centre description, item number of contract or Federal supply Order   Discount Terms   Cost   Centre description, item number of contract or Federal supply Discount Terms   Cost   Per    PAYMENT:  Complete   Partial   Use continuation sheet(s) if necessary   Cost   Per    Shipped from to Weight Government B/L No.   Total    I certify that the above bill is correct and just and that payment has not been received.   (Fayee must NOT use this space)    Officences   Officen								
No. and Date of Order		(Addr	ress) (Oit	y) (Ste				
PAYMENT:  Complete			(Enter description, item nun schedule, and other inf	on SERVICES  nber of contract or Federal sur  ormation deemed necessary)	QUANTIT	Y		Do
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Approved For Release 2001/08/15 : CIA-RDP64-00360R000600040030-9 STATOTHR Approved For Release 2001/08/15 : CIA-RDP64-00360R000600040030-9